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Director

State of California—Health and Human Services Agency  
Department of Public Health



ARNOLD SCHWARZENEGGER  
Governor

June 12, 2008

To: Emergency Department Medical and Nursing Directors  
Re: Preventing Measles Transmission in California

There has been a recent upsurge in measles in the United States associated with international travel, including 12 children ill in San Diego.

[<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5708a3.htm>]

Measles is extremely contagious. Many of these recent cases could have been prevented if

- Clinicians had initially considered measles as the cause of fever and rash.
- Health care facilities had implemented adequate infection control precautions for patients with fever and rash, whether or not measles was suspected.
- Clinicians had promptly notified public health departments that cases of measles were suspected.
- Testing for measles had been performed promptly at California's public health laboratories instead of private laboratories.

To minimize the risk of measles transmission in healthcare settings, CDPH recommends:

1. Review the symptoms of measles (e.g., cough, coryza, conjunctivitis, fever, morbilliform rash) with your staff, especially triage nurses: See enclosed poster and <http://www.cdc.gov/vaccines/vpd-vac/measles/photos.htm>.
2. Prompt airborne isolation: At triage, promptly screen and isolate patients with fever and rash. Immediately mask and isolate suspect measles cases in a room with negative pressure, or if not available, in a private room with the door closed. If notified in advance, evaluate patients with suspected measles in the car or outside of the building. More information on airborne infection control is at [http://www.cdc.gov/ncidod/dhqp/gl\\_isolation.html](http://www.cdc.gov/ncidod/dhqp/gl_isolation.html).
3. Investigate history of recent international travel and possible measles exposure, and past immunization and disease. A history of two doses of MMR vaccine greatly reduces, but does not exclude the possibility of measles.
4. Ensure that all healthcare workers are immune to measles. Allow only immune persons (employees, contracted workers, visitors) to enter the patient's room. Immunity is defined as:
  - documented administration of 2 doses of live measles vaccine
  - laboratory evidence of immunity
  - year of birth before 1957
  - documentation of physician-diagnosed measles

5. Notify the local health department immediately by phone about any patients with suspected measles to initiate investigation and arrange for testing at a public health laboratory.
6. At discharge, instruct patients who might have measles to isolate themselves at home. Suspected cases and exposed persons should inform all subsequent healthcare providers about the possibility of measles before they enter another healthcare facility.
7. Do not refer patients who might have measles to other facilities unless infection control measures can be implemented during transport and at the receiving facility.

To assist clinicians, a poster is enclosed for display in the Emergency Department, outpatient clinic, and other key locations in the hospital. Additional posters are available at: <http://www.cdph.ca.gov/programs/immunize/Documents/IMM-908.pdf>. Please contact us at 510-620-3737 for additional information.

Sincerely,

A handwritten signature in black ink, reading "Howard Backer". The signature is fluid and cursive, with a long horizontal line extending from the end of the name.

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Enclosure